| STATE OF UTAH  DEPARTMENT OF NATURAL RESOURCES  DIVISION OF OIL, GAS AND MINING                      |   |   |                  |   |   | FORM 3  AMENDED REPORT |          |  |
|--|---|---|------------------|---|---|------------------------|----------|--|
| APPLICATION FOR PERMIT TO DRILL  |   |   |                  |   | 1. WELL NAME and NUMBER FEDERAL 13-6D-64  |                        |          |  |
| 2. TYPE OF WORK  DRILL NEW WELL ( REENTER P&A WELL ( DEEPEN WELL                                     |   |   |                  |   | 3. FIELD OR WILDCAT BRUNDAGE CANYON   |                        |          |  |
| 4. TYPE OF WELL Oil Well Coalbed Methane Well: NO  |   |   |                  |   | 5. UNIT or COMMUNITIZATION AGREEMENT NAME   |                        |          |  |
| 5. NAME OF OPERATOR  BERRY PETROLEUM COMPANY   |   |   |                  |   | 7. OPERATOR PHONE 303 999-4044  |                        |          |  |
| B. ADDRESS OF OPERATOR 4000 South 4028 West Rt 2 Box 7735, Roosevelt, UT, 84066                      |   |   |                  |   | 9. OPERATOR E-MAIL<br>kao@bry.com   |                        |          |  |
| 10. MINERAL LEASE NUMBER<br>(FEDERAL, INDIAN, OR STATE)  | 11. MINERAL OWNERSHIP   |   |                  | 12. SURFACE OWNERSHIP                             |   |                        |          |  |
| UTU77322   |   | FEDERAL INDIAN STATE FEE                                    |                  |   | FEDERAL ( ) INDIAN ( ) STATE ( ) FEE ( )  |                        |          |  |
| 13. NAME OF SURFACE OWNER (if box 12 = 'fee')  |   |   |                  |   | 14. SURFACE OWNER PHONE (if box 12 = 'fee')                                       |                        |          |  |
| 15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')   |   |   |                  |   | 16. SURFACE OWNER E-MAIL (if box 12 = 'fee')                                      |                        |          |  |
| 17. INDIAN ALLOTTEE OR TRIBE NAME<br>(if box 12 = 'INDIAN')  |   | 18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS |                  |   | 19. SLANT   |                        |          |  |
|  |   | YES (Submit Commingling Application) NO                     |                  |   | VERTICAL DIRECTIONAL MORIZONTAL   |                        |          |  |
| 20. LOCATION OF WELL   | FO  | OTAGES  | QTR-QTR          | SECTION   | TOWNSHIP  | RANGE                  | MERIDIAN |  |
| LOCATION AT SURFACE  | I AT SURFACE 1115 FS  |   | SESW             | 6   | 6.0 S   | 4.0 W                  | U        |  |
| <b>Top of Uppermost Producing Zone</b> 747 FS  |   | SL 821 FWL  | SWSW             | 6   | 6.0 S   | 4.0 W                  | U        |  |
| At Total Depth 634 FS  |   | SL 609 FWL  | SWSW             | 6   | 6.0 S   | 4.0 W                  | U        |  |
| 21. COUNTY  DUCHESNE   | 22. DISTANCE TO N   | IEAREST LEASE LI<br>1115                                    | NE (Feet)        | 23. NUMBER OF                                     | 23. NUMBER OF ACRES IN DRILLING UNIT 1280   |                        |          |  |
|  | 25. DISTANCE TO NEAREST WELL IN SAME POOL (Applied For Drilling or Completed) |   |                  | <b>26. PROPOSED DEPTH</b> MD: 5710 TVD: 5609      |   |                        |          |  |
| 27. ELEVATION - GROUND LEVEL 7008  |   | 28. BOND NUMBER  UTB000035                                  |                  |   | 29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE 4311041 |                        |          |  |
| ATTACHMENTS  |   |   |                  |   |   |                        |          |  |
| VERIFY THE FOLLOWING ARE ATTACHED IN ACCORDANCE WITH THE UTAH OIL AND GAS CONSERVATION GENERAL RULES |   |   |                  |   |   |                        |          |  |
| <b>✓</b> WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER                                  |   |   |                  | <b>✓</b> COMPLETE DRILLING PLAN                   |   |                        |          |  |
| AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)                                      |   |   |                  | FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER |   |                        |          |  |
| DIRECTIONAL SURVEY PLAN (IF DIRECTIONALLY OR HORIZONTALLY DRILLED)                                   |   |   |                  | TOPOGRAPHICAL MAP                                 |   |                        |          |  |
| NAME Kathy K. Fieldsted TITLE Sr. Regulatory & Permitti  |   |   | Permitting Tech. | ing Tech. <b>PHONE</b> 435 722-1325               |   |                        |          |  |
| SIGNATURE DATE 04/26/2010  |   |   |                  |   | EI  | MAIL kkf@bry.com       |          |  |
| api number assigned<br>43013503470000  | 4   | APPROVAL Permit Manager                                     |                  |   |   |                        |          |  |

